UNITED STATES COURT OF APPEALS FOR THE ELEVENTH CIRCUIT Appearance of Counsel Form

Attorneys who wish to participate in an appeal must be properly admitted either to the bar of this court or for the particular proceeding pursuant to 11th Cir. R. 46-1, et seq. An attorney not yet properly admitted must file an appropriate application. In addition, all attorneys (except court-appointed counsel) who wish to participate in an appeal must file an appearance form within fourteen (14) days after notice is mailed by the clerk, or upon filing a motion or brief, whichever occurs first. Application forms and appearance forms are available on the Internet at www.call.uscourts.gov.

| Please Type or Print | | C | . CA 1 | NI 00 440 | 200 | |
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| | | Cot | art of Appeals | s No. <u>20-116</u> | 992 | _ |
| USA | | vs. Rea | ality Winner | | | _ |
| The Clerk will enter my appear | rance for these named p | oarties: Reality | / Winner | | | _ |
| In this court these parties are: | ☑ appellant(s) | □ peti | tioner(s) | ☐ interv | venor(s) | _ |
| | appellee(s) | ☐ resp | oondent(s) | amic | us curiae | |
| ☐ The following related | or similar cases are per | nding on the do | ocket of this c | ourt: | | |
| ☐ Check here if you are | lead counsel. | | | | | _ |
| I hereby certify that I am an ac (including the District of Colu- lapsed for any reason, includin fees or failure to complete con- court within 14 days of any char | mbia) named below, and g but not limited to retitinuing education require | d that my licen rement, placen rements. I und | se to practice nent in inactive erstand that I | law in the nave status, fail am required | amed state is not current ure to pay bar membersh to notify the clerk of thi | ij |
| State Bar: Geo | orgia | Sta | te Bar No.: <u>55</u> | 54141 | | |
| Signature: | 2 | | | | | |
| Name (type or print): Brett A. S | Switzer | | | Phone: <u>404-</u> | 443-6711 | |
| Firm/Govt. Office: Baker,Done | elson, Bearman, Caldwo | ell & Berkowitz | , PC E-mail: | bswitzer@ba | akerdonelson.com | |
| Street Address: 3414 Peachtre | | | | Fax: <u>404-238</u> | 8-9710 | |
| City: Atlanta | | | State: G | Α | Zin: 30326 | |